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## ABSTRACT

This report explains the state of child care in Canada and proposes specific solutions to remedy the inadequacies of the current system. Part one discusses the changing composition and needs of Canadian families, defines the nature of child care, and explains what a comprehensive child care system should consist of. Part two addresses the difficulties that many families have in obtaining adequate child care, the availability of regulated child care, the high cost of such care, and the components of high quality child care. Part three presents some solutions to these problems, outlining the current national child care policy, the debate about child care policy in the 1980s, and possible solutions for the future. Contains 84 references. (MDM)

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# Child Care for Canadian Children and Families

## Occasional Paper No. 1

The  
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UNIVERSITY OF TORONTO

# **Child Care for Canadian Children and Families**

## **Occasional Paper No. 1**

**Martha Friendly  
Laurel Rothman  
Mab Oloman**

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## MEMBERS OF THE REVIEW COMMITTEE

The members of the Review Committee assisted with the development of this paper by contributing useful and constructive criticism at several points. Committee members' affiliations are listed for information purposes only; the opinions presented in this paper do not necessarily represent the positions of the organizations which are identified.

Howard Clifford  
National Advisor, Child Care Programs, Health and Welfare Canada  
Ottawa

Lise Corbeil  
Executive Director, National Anti-Poverty Organization  
Ottawa

Janet Davis  
Child Care Program Advisor, Toronto Board of Education;  
President, Ontario Coalition for Better Child Care  
Toronto

Dorothy Dudek  
Executive Director, Manitoba Child Care Association  
Winnipeg

Dr. Robert Glossop  
Director of Programs and Research, Vanier Institute on the Family  
Ottawa

Sandra Griffen  
Past-President, Canadian Child Day Care Federation;  
Department of Child Care, University of Victoria  
Victoria, British Columbia

Sharon Hope Irwin  
Director, Specialink; Child Care Advocates of Nova Scotia  
Sydney, Nova Scotia

Irene Kyle  
Ph.D. Candidate, Department of Family Studies,  
University of Guelph  
Toronto

Dr. Donna S. Lero  
Principal Investigator, National Child Care Study;  
Associate Professor, Department of Family Studies,  
University of Guelph  
Guelph

Penni Richmond  
Women's Bureau, Canadian Labour Congress  
Ottawa

## **PREFACE: CHILD CARE AND THE UNITED NATIONS CONVENTION ON THE RIGHTS OF THE CHILD**

In 1990, Canada became one of 80 member nations of the United Nations to sign the United Nations Convention on the Rights of the Child. Canada was an active participant in drafting the Convention and in 1990, the Canadian Prime Minister co-hosted a special meeting to promote the Convention at the United Nations.

The Convention covers a wide variety of issues pertaining to children including poverty, health, education and protection from physical violence, maltreatment and neglect. Child care is explicitly recognized among these as a significant children's rights issue.

Many advocates for children hope to use the Convention as a tool on behalf of children in Canada and in other countries. The Convention is a useful tool for focusing attention on children's issues but it should be noted that although the Convention is in force as international law and a signature signifies a nation's serious intention to comply, there is no practical way of requiring nations to honour its terms.

Child care has been a key social policy issue in Canada for the past decade and will continue to be regardless of Canada's participation in the Convention. Nevertheless, the United Nations' inclusion of child care as a children's rights issue is a notable recognition of its importance for children worldwide.

### ***Does Canada have a system of child care?***

Today, Canada does not have a system of child care. Although Canada is a developed, affluent nation, unlike most other developed nations it has not taken a proactive or even a facilitative approach to developing a system of high quality child care services. Rather, child care has developed in a haphazard manner driven by market forces, with regional inhibition and facilitation and community initiatives directing development of services.

The current child care situation does not meet the needs of Canadian children, families or women. From the perspective of the United Nations Convention on the Rights of the Child or other perspectives which focus on children, families or women, Canada does not meet its obligations on child care. Over the next few years, the Convention will present new opportunities for Canadians with an interest in children to develop new strategies for Canadian child care.

## **PART I      BACKGROUND**

There are a number of social, cultural and economic reasons why the Canadian family has different needs than it had a generation ago. These changes have contributed to the demand for an improvement in child care which has developed during the last decade. A comprehensive Canadian child care system is a key element in a broader public policy strategy which is needed to support children, families, and women, and to meet the needs of the wider society.

### **INTRODUCTION: CHANGING FAMILIES, CHANGING NEEDS**

Canada has traditionally valued the contribution which parents make to our society by rearing children and has supported their efforts through a variety of social and fiscal programs and policies. National programs like the health care system, the Canada Assistance Plan, family allowances, national contributions to housing, disabled and survivor pensions, child tax credits and maternity leave benefits through unemployment insurance all reflect this historical value and have contributed to families' ability to raise children.

Significant recent changes in the Canadian family have been well documented. As an inter-provincial team of Ministers of provinces and territories described:

Changing family structures are impacting on family life. Children are being raised in smaller families, with fewer siblings. Greater numbers of people are experiencing divorce, remarriage and blended families...Economic pressures and social changes have altered the labour participation rates of family members, especially women (Ministers of the Provinces and Territories Reporting on Family Policy, 1990:4).

Labour force participation rates of mothers of young children are the perhaps the clearest evidence of recent changes in Canadian families. Before the 1980s, labour force participation rates for mothers of preschool children were somewhat lower than those for all women. By the end of the 1980s, however, participation by mothers of young children, including those whose youngest child was less than three, had surpassed that of all women (Statistics Canada, 1990). Mothers of young children have continued to enter the labour force at rates which increase year after year.

In recent years, social changes and economic forces including an erosion in real income have combined to put new financial pressures on Canadian families. Provincial minimum wages have not kept pace with inflation. The number of female-headed, sole-support families has risen and the income gap between single-parent families and two-parent families has widened (Ministers of the Provinces and Territories Reporting on Family Policy, 1990).

The decision to tax back family allowances means that this family support program is no longer universal. Changes in the income tax system have shifted more of the tax burden to families with children, especially those who are low and middle income, and new taxes on consumption mean that many Canadian families with children have even less spending power (Canadian Council on Children and Youth, 1988). Diminished federal funding for national programs which have traditionally been part of Canada's system of support for families with children--the Canada



Assistance Plan, family allowances, unemployment insurance and the health care system--has further weakened the financial situation of many families.

At the same time, Canada is dependent on the economic contribution of women, in terms of both their productive labour and revenue derived from taxation. Canada's ability to compete in the world economy requires a productive, motivated workforce which will include men and women with young children.

These social, economic and financial changes in the situation of Canadian families and the Canadian State, together with social and attitudinal changes emphasizing equality for women, have created pressures for a system of child care which recognizes the realities of Canadian life at the end of the twentieth century. At the same time, advances in child development research indicate that the quality of care children experience can have a profound effect on their future development (Hayes, Palmer, & Zaslow, 1990).

This paper takes the perspective that the introduction of a system of child care which is high-quality, comprehensive and accessible to all families who need it should be a high priority for Canada. However, supplementary child care is but one part of a broad family policy. Some societies which actively support families do so through a series of supportive programs and policies including income supports and tax arrangements, parental leaves and adjusted and flexible work arrangements. As Kamerman and Kahn (1981), have pointed out, child care continues to be a responsibility borne primarily by employed mothers. With this in mind, this paper recognizes that children and families would be well served by a broad Canadian family policy but focuses specifically on child care and parental leave as central components of a broader family policy.

## **CHILD CARE AS A SOCIAL POLICY ISSUE**

During the 1980s, child care became a prominent social policy issue in Canada. The need for care for young children to supplement that provided by their own families was examined by federal and provincial policy makers, by the women's movement, trade unionists, and a broad range of other social groups as a matter of national importance.

During the decade, several factors became clear:

1. The need for child care for working parents has grown enormously in Canada. All evidence suggests that the need will continue to grow in the future;
2. The need for child care is not unique to urban areas. Families in urban, suburban and rural areas in all regions of Canada, of all incomes and family types, experience a variety of similar (not identical) needs;
3. Although the needs of working parents are central to the discussion about child care, there is convincing evidence that a range of other child care and related services and policies should be considered. These include programs which are efficacious for children with special needs, part-time programs to provide early childhood education to children at home with a parent or another caregiver, resource programs to provide

occasional care, education, and other services to parents and other caregivers at home, and policies to help parents balance work and family life;

4. Although the provision, quality and financing of child care varies substantially across the country, no region of Canada has addressed child care adequately.

Before the mid 1970s, child care was perceived primarily as a service for the needy and as an issue which was most visible at the level of local communities. However, public pressure to improve access to child care for working parents mounted. In the 1980s, child care began to figure prominently in national political and policy debates. By the end of the decade, however, Canada's child care situation had not improved. In some ways, it had grown worse.

What is child care? Who is child care for? What is the situation of child care in Canada? Why is child care a problem? Finally, what kinds of policies are needed to improve the situation for children and families?

### **WHAT IS CHILD CARE?**

Various terms are used to describe what this paper calls "child care". Canada's original child care centres were called "creches" and often the care of children while their parents are at work is called "day care". In the United States, the term "child day care" is sometimes used and Europeans call their programs for young children "nurseries", "écoles maternelles", "creches" and "kindergartens". "Early childhood program", "preschool" or "nursery school" are used to refer to some kinds of child care programs. Child care also refers to children cared for by regulated caregivers in family day care homes.

In Canada today the term child care is commonly used to include a range of care arrangements and education for children under the age of 12 outside their immediate and extended family and regular schooling. These supplementary child care arrangements are regulated by provincial or territorial governments or are unregulated, informal or private arrangements which fall entirely outside of government authority. In addition, in some regions of Canada, there are programs which do not conform specifically to provincial or territorial legislation but are monitored by government officials. Finally, sometimes formal, organized activities like recreation programs which have a mandate other than child care are used by working parents to provide care in their absence.

In Canada, regulated child care programs are required to conform to legislated provincial/territorial standards and are inspected or monitored on a regular basis. Regulated or "formal" child care includes:

- programs for groups of children called "child care centres" or "day care centres" which may operate for full or long days, short or extended or unusual hours, and may be located in residential communities, at or near workplaces, in schools or in other locations;
- part-day programs which are sometimes called "nursery schools";
- care for small groups of children in the home of a child care provider, operated either under the supervision of an agency, a municipality, or supervised directly by provincial

or territorial government officials, usually called a "family day care home" or a "family day home";

- programs for school-aged children which provide care outside school hours, either before or after school, during school holidays or teacher's professional activity days;

Unregulated but government-monitored programs currently include:

- resource or drop-in programs to provide parents at home or other providers of child care (such as a nanny, a relative or a babysitter) with information, parenting and caregiving resources, toy lending, networking, socialization opportunities and occasional respite care for children;
- short-term care for use in emergencies, for example, when a child is mildly ill, or when the regular caregiver is unavailable;
- care in the child's own home; for example, care overnight for parents who work nights or who do long hours of farm work.

Formal programs which operate under a mandate other than child care include:

- residential and day summer and holiday camps and programs;
- recreation programs;
- after-school or after-four programs which are not regulated as child care.

Unregulated, informal child care includes:

- care in an unrelated care-provider's or a relative's home which is not regulated by government;
- care in the child's own home by either a baby-sitter, a nanny, a relative or friend not regulated by government.

### ***Regulated and unregulated child care***

In Canada, most children who attend supplementary child care while their parents work are not in regulated child care. Data collected by the National Child Care Survey found that in 1988, the primary care arrangement for 16.9% of children aged 0-6 was regulated group care (including nursery school, before- and after-school care and kindergarten); for 11.4% of this group, the primary arrangement was a child care or day care centre. For another 2.0%, the primary arrangement was care in a regulated family day care home.

For 29.8% of 0-6-year-olds, the primary arrangement was care by their own parents (including care at a parent's workplace or care shared by parents working different schedules). Other relatives provided the primary arrangement for 18.5% and 30.9% of 0-6-year-olds had the primary care arrangement provided by non-relatives (Lero, Pence, Goelman, & Brockman, in preparation)<sup>1</sup>.

It is difficult to conceptualize unregulated child care arrangements within a vision of a high quality Canadian child care system because informal or unregulated child care, is, by its very nature, outside government scrutiny and outside a child care "system". Furthermore, many people believe that it is inappropriate for government to scrutinize that portion of unregulated care which is provided by relatives.

Research indicates that regulation is one important contextual variable which contributes to the quality of child care. Both centre-based and family day care provided within a system of good regulation are more likely to provide high quality than poorly regulated or unregulated care. (See page 24 for a discussion of this research).

### *A comprehensive child care system*

This paper takes the position that within a comprehensive child care system, a range of child care options operated under the scrutiny of government would offer care for all children who need it and whose parents desire it and that public funds would support only regulated child care. However, it is not assumed that parents would be prevented from making their own child care arrangements outside government-regulated services if they choose to do so.

A comprehensive child care system would include:

- child care centres which would operate for full, short or long days or extended or unusual hours, located in residential communities, at or near workplaces, in schools or in other locations; available on a full-time or part-time basis;
- part-day nursery school programs;
- family day care in the home of a child care provider,
- programs for school-aged children outside school hours, either before or after school, during school holidays or teacher's professional activity days;
- family resource programs which would offer parents at home or other providers of child care (like a nanny, a relative or a babysitter) information, parenting and caregiving resources, toy and equipment libraries, networking and social opportunities and occasional respite care for children;
- short-term care for use in emergencies, for example, when a child is mildly ill, or when the regular caregiver is unavailable;
- care arrangements in the child's own home in certain circumstances: for example, care overnight for parents who work shifts or who do long hours of farm work.

All of these services would include children with special physical and developmental needs.

One model which has been proposed to deliver this variety of child care programs in a coordinated manner at the community level is "The Neighbourhood Hub Model" (Action Day Care, 1979). This coordinated approach can maximize the efficient use of resources and can be flexible and responsive to local community needs.

### ***Parental leave***

Public policy which supports families by providing job protection and benefits is an important adjunct to a comprehensive child care system. Such a policy would allow: leave from work following childbirth or adoption, to care for very young children; time away from work to carry out family responsibilities such as care of children when they are ill; and flexible or short work hours.

### **WHO IS CHILD CARE FOR?**

Child care can be viewed in different but complementary ways from the perspective of several target groups. Each perspective provides its own rationale for the provision of high quality child care.

From a **child** development perspective, high quality child care and early childhood education can contribute significantly to positive developmental outcomes and a good quality of life. Research in child development and early childhood education has demonstrated that the quality of child care can have a profound, long-term impact on a child's development (Hayes, et al., 1990).

For **families**, good quality child care can enable parents to combine work and family responsibilities while working or attending school or job training. In this sense, child care services are part of a larger comprehensive system of social welfare and family support services. Child care services can also act as a vehicle for delivering other community services, including health care, nutritional supplements and parent education, for families who need them.

**Women** can benefit from a child care system that allows them to participate more fully in the labour force; indeed, poor access to child care is a major impediment to women's economic equality (Gunderson, 1986). As the Royal Commission on Equality of Opportunity in Employment pointed out,

Child care is the ramp that provides equal access to the workforce for mothers (Abella, 1984:178).

Finally, benefits from a high quality child care system extend to the **community and society** by supporting a steady workforce, contributing to high productivity and helping to alleviate the effects of poverty and associated social problems like poor school achievement (Ontario Ministry of Community and Social Services, 1989; Esbensen, 1985).

## PART II. WHAT IS THE PROBLEM?

Across Canada, families encounter similar (but not identical) child care problems. The difficulty parents have in finding and paying for high quality child care varies across the provinces and territories and even varies in different communities within a province. However, in every part of the country, many, many parents find it difficult or impossible to find and pay for child care which meets their family's particular needs.

### A FAMILY'S SEARCH FOR CHILD CARE

#### *Availability, affordability and quality*

The problems associated with child care in Canada can be divided into three main categories: availability, affordability and quality. A description of the search for child care by a Canadian family which follows illustrates these problems:

1. The gap between need, demand and supply means that often appropriate child care which meets families' needs is **unavailable**;
2. Parents often can not **afford** child care, especially high quality child care employing well-paid staff and especially in provinces which contribute less funding. This is particularly true for care which is very labour intensive (infant and toddler care) or unpredictable (seasonal care, emergency care and care at unusual hours);
3. Too often, even regulated child care is of **unacceptable quality** both from a child development perspective and from a health and safety perspective.

These topics are examined in more detail in Sections 6, 7 and 8 of this paper.

#### *A search for child care*

To illustrate the difficulties experienced by families in every region of the country, a family's search for child care for their infant is described.

Sara is sixteen months old. Her mother, Nellie, works as a bank teller; she and Charles, Sara's dad, who works at a small food processing plant, were married four years ago. Sara has a thirteen year old brother, born when her mom was a young single parent barely out of her teens. One of Sara's grandmothers is retired and lives in Victoria; her dad's mother works for the government.

When Sara was born, Nellie had a maternity leave of 17 weeks, paid at 60% of her wages. She enjoyed her leave. She would have liked to spend a few months longer time at home with Sara even though it was hard for the family to make ends meet with Nellie's wages reduced to 60%. Charles would have liked to spend some time at home too.



**1990 changes to the federal Unemployment Insurance Act now pay for a 10 week paid maternity leave, followed by a 15 week paid parental leave which is available to either parent. These maternity and parental leave benefits at 60% of wages (up to a maximum of \$408 in 1991) are lower than those of almost any industrialized nation (Townson, 1986).**

**Leave provisions which allow parents to use the federal benefits are the responsibility of provincial and territorial governments. Most provinces and the territories have not yet adapted their parental leave policies so that parents can take advantage of the changes to federal benefits.**

The family had thought about child care for the new baby early in the pregnancy. Sara's older brother had gone to a child care centre when he was an infant, allowing Nellie to take a job training course. Charles and Nellie had taken several books about choosing high quality child care out of the library and checked with the provincial child care office about what was available but were told that with their gross income at about \$42,000, they would not qualify for a government fee subsidy.

**The federal government establishes guidelines for maximum income eligibility levels for fee subsidies. None of the provinces, however, use income eligibility levels as high as the federal legislation allows.**

Nellie and Charles began their search for infant care early. They called a number of licensed programs but most of the centres told them that there were so many names on their waiting lists that it would not be possible to visit until a space was actually available.

One centre told them that they could visit. When Nellie and Charles did so, their visit made them wonder about the quality of infant child care in their province. The centre was dark and not very clean and was staffed by workers who were having trouble coping. Two of the three staff with the baby group of ten had been working at the centre for less than a month.

**Provincial standards regulating physical environments, staff training, staff/child ratios and group sizes vary from being relatively reflective of child development research to being seriously deficient. Low wages and poor working conditions encourage high staff turnover. In addition, minimum provincial standards are unevenly enforced in much of the country. (For more detailed information about provincial standards, see British Columbia Task Force on Child Care, 1991 and The Childcare Resource and Research Unit, Information Sheets: The Provinces and the Territories, 1990).**

Finally, a non-profit child care centre called to tell them that a space would soon be available. Nellie and Charles visited the centre and loved it. The staff and a member of the parent-community board talked with them about the program. The babies seemed to be thriving with the well-trained, responsive staff. They asked about staff turnover; one of the infant staff had been there since the centre had opened three years earlier. Even though the centre was somewhat out of their way on their route to work, the care Sara would get would be worth the extra travel.

**Across the country, the availability of infant care varies from none at all to a combination of centre-based and family day care. No region of Canada, however, provides a supply of infant care which approaches the need.**

The cost of care for an infant at the centre, however, was \$450 a month. Although the fees in their province were lower than they were in some regions of Canada, Charles and Nellie decided, with regret, that they couldn't afford to use the space.

**Fees for child care across the country vary substantially by province, by the age of the child and by the characteristics of the centre. Better centres with more and better trained staff cost more to operate and must charge higher fees.**

In the end, Sara went to a babysitter down the street who charged less than the cost of regulated child care; still, her parents were paying \$75 a week. The babysitter was kind but they were uncertain about how much attention the three babies and one toddler in her care got during the day or how often she took them outside in nice weather. Sometimes Sara was soaking wet when they picked her up and her parents worried that she wasn't being changed frequently enough. After Sara was there for five months, the sitter told Nellie and Charles that she would not be able to care for her any more because she was needed in Saskatoon to help her daughter out with child care.

Then Charles lost his job when his plant closed. Charles and Nellie now were eligible for a fee subsidy while he looked for work. There was, unfortunately, now no space available for Sara at the child care centre they had liked.

However, they were able to use a regulated child care provider in the neighbourhood. She had another baby to look after as well as two school-aged children in the late afternoons. A worker from the child care agency with which she worked visited her once a month and she participated in training sessions on child development, activities and nutrition on a regular basis. The agency held weekly playgroups for the children while the care providers participated in group training sessions and they provided a toy and equipment exchange.

**The provision of regulated family day care is uneven across Canada. While four provinces have little or no regulated family day care, several others have relatively well-developed systems that provide a complement to group care. In some provinces, providers are individually licensed by government; in others, they work with agencies which are responsible for supervision of care-providers.**

Finally, Charles got another job and as a result, the family's income returned to its pre-unemployment level. The family was no longer eligible for a fee subsidy and with regret, Nellie and Charles withdrew Sara, now an active toddler, from the regulated family day care home and began again to look in the newspaper for a cheaper, unregulated babysitter.

This kind of scenario is repeated every day across Canada. The majority of families do not have access to high quality centre-based care, to regulated family day care nor to fee subsidies. In Canada today, there are areas where there are no child care subsidies or where there are not enough subsidies to meet the demand. Or fee subsidies do not cover the whole cost of child care, even for the lowest income families.



In many parts of Canada, regulated child care is too costly for most families unless they are subsidized or have two upper-middle-income earning parents. In some regions, the cost of regulated family day care is approximately that of high quality centre care and even the cost of unregulated care is high for many families. If Nellie and Charles had worked unusual hours, there would have been virtually no regulated child care available at any price in almost any part of the country.

Some families have close relatives who care for their young children. Often however, families do not have these options and young children are left in unregulated situations with sitters who care for too many children or are even left alone. Unregulated arrangements appear to have a high turnover rate; a study carried out in Metropolitan Toronto in the mid 1970s found that the mean length of an unregulated child care arrangement was six months (Johnson, 1977).

#### **AVAILABILITY OF CHILD CARE: NEED, DEMAND AND SUPPLY**

##### ***Mothers in the labour force***

The continuing increase in the labour force participation rate of mothers of young children is the driving force creating pressures for improved child care in Canada. In the past twenty years, mothers of young children have entered the labour force in ever-increasing numbers so that by 1990, 63.6% of Canadian women with children younger than six worked outside the home (Statistics Canada, 1990).

In a national survey which collected detailed data on the use of child care in Canada, the researchers of the Canadian National Child Care Study found that in 1988 there were:

- 224,500 children aged 0-17 months whose parents worked at least 20-29 hours per week, or were students;
- 220,400 children aged 18-35 months whose parents worked at least 20-29 hours per week, or were students;
- 485,400 children aged 3-5 years whose parents worked at least 20-29 hours per week, or were students;
- 711,800 children aged 6-9 years whose parents worked at least 20-29 hours per week, or were students;
- and 575,900 children aged 10-12 years whose parents worked at least 20-29 hours per week, or were students (Lero, Pence, Shields, Brockman & Goelman, 1991).

In 1990, Health and Welfare Canada estimates indicated that 1,265,237 children aged 0-6 and 1,720,310 children aged 6-12 were assumed to need child care because both parents (or one parent in a single parent family) were in the labour force.

Labour force participation rates of mothers of young children and numbers of children whose mother is in the labour force are only an approximation of the need for supplementary child care. Definitive data do not exist which can tell us how many of these children's families "need" or "want" child care or need or want child care which is different from their current arrangement. These figures are, however, the best approximation to "need" that we have at the present time.

### *The difference between the need and the demand for child care*

The need for child care and the demand for child care are not the same thing. A family is assumed to need full time child care if both parents (or a single parent) are in the labour force (or otherwise away from home) full time. However, whether there is a **demand** for regulated child care is determined by a series of factors including the child's age, cost of regulated child care, the possibility of other kinds of care, the families' values, preferences, attitudes and knowledge about forms of child care and child development and the relative convenience of various child care possibilities. Economic analyses of the demand for child care emphasize that a number of factors interact to determine the demand for child care (Cleveland, 1990, 1991; Connelly, 1990).

### *Supply of regulated child care*

Statistics describing the supply of regulated child care have been compiled by Health and Welfare Canada since the early 1970s. Since that time, the supply of regulated child care has grown. Regulated family day care has become a significant (but still minor) part of the picture of child care services, the supply of infant-toddler care has grown, and school-age child care services have developed in most parts of Canada. In the years between 1971 and 1990, the supply of regulated child care grew from 16,791 spaces to 282,465, or about 17-fold (Health and Welfare Canada, 1991).

### *The gap widens*

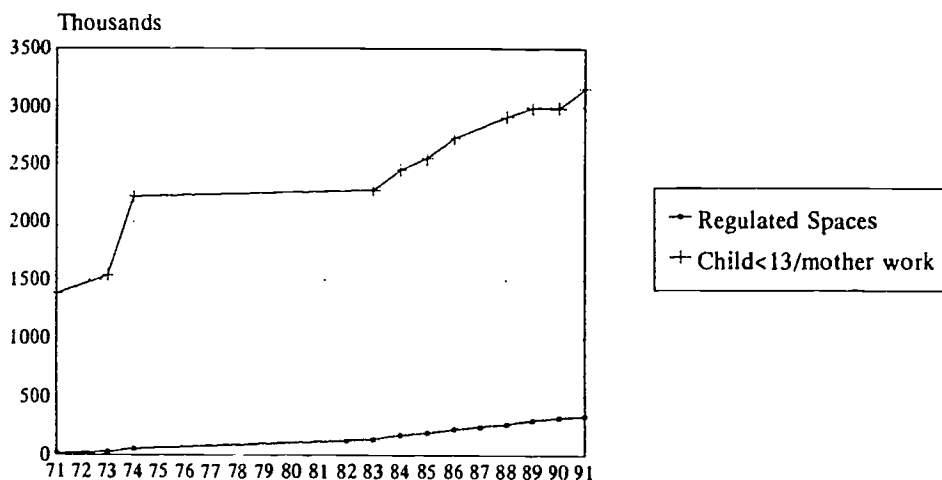
However, although the supply of child care grew relatively steadily (with variations in the rate of increase year by year, regionally, and by age group), the number of children who need extra-familial care increased too. As the number of young children with a mother in the paid labour force increased year after year, the supply of regulated child care to accommodate these children became more and more inadequate even though expansion continued.

**By 1990, there were about 500,000 more children under 13 with a mother in the labour force for whom there was no regulated child care space than there had been in 1983 (Health and Welfare Canada; 1991).**

In 1983, Health & Welfare Canada reported that there were 139,070 regulated child care spaces and 2,275,595 children less than 13 years old with a mother in the labour force. In 1990, there were 320,024 child care spaces and 2,985,500 children with a working mother.

# THE GAP WIDENS

Children <13 with mothers in the labour force and  
number of regulated child care spaces



1971-1974 figures represent children <14 years of age with mothers in the labour force.  
Comparable figures for 1975-1981 were not available.

Source: Status of Day Care in Canada. Health and Welfare Canada 1971-1991.

## Appropriate child care

Even from the narrow perspective of supply and demand or assumed need, labour force participation rates and child care space figures do not tell the whole story. Characteristics of the child care must match the needs of parents and characteristics of the children in order for the care to be appropriate. These characteristics include:

- the ages of children served
- where the care is located
- the hours of operation
- the type of service
- special characteristics, e.g., capability and willingness to include children with special physical or developmental or specific linguistic or cultural needs.

In many parts of Canada, families who are seeking culturally appropriate aboriginal or non-majority language care, who work unusual schedules, whose child has special needs, or is an infant, toddler or school-aged child, are unlikely to find that appropriate, regulated, high quality child care is available in their community.

### ***Infant and toddler care***

Although today most provinces have regulated infant and toddler care, in practice in most of the country there is very little regulated care for children of this age. Across Canada in 1990, there were only 31,259 regulated child care spaces in child care centres for children defined as infants and toddlers (that is, under 2.5 or 3 years of age) while there were an estimated 623,340 children with a working mother who needed supplementary care (Health and Welfare Canada, 1991). (N.B. Canada-wide age-group statistics are not available for regulated family day care).

### ***School-aged child care***

For school-aged children aged 6 to 12 years there were 90,528 regulated spaces in child care centres. 1,720,310 children aged 6 to 12 years had a mother in the labour force in 1990 (Health and Welfare Canada, 1991).

### ***Children with special developmental or physical needs***

There are no definitive statements on the need for alternative child care for children with developmental or physical special needs. Current practice favours the inclusion of children with special needs in regular child care settings for developmental purposes. From this perspective, the incidence of a "special needs child care population" would be some combination of the incidence of special needs in the preschool population (between 8% and 25%, depending on the definition) and the "use factor" of child care in the general population (Lazure, 1979; Lesson & Rose, 1980; Canning & Lyon, 1989). The figure of 20% has been used as a predictor of the percentage of children in child care who would be classified as having special needs were such children not denied access at any rate greater than the general population (Irwin, Personal correspondence).

Current estimates on the percentage of children with special needs currently in child care range from about 5% to 10%, if special needs is defined as "a child for whom extra funding or extra services are provided" (Irwin, Unpublished).

### ***Child care for aboriginal children***

Aboriginal children are currently under-represented in the child care system yet there is a great need for flexible child care services to accommodate a range of child care needs in aboriginal communities, both on and off native lands (Manitoba Child Care Task Force, 1989; British Columbia Task Force on Child Care, 1991; Seto-Thomas, 1990). At the same time, aboriginal groups have a strong interest in maintenance of cultural integrity and control of child care programs by their own communities (Thomas & Learoyd, 1990; Assembly of First Nations, 1989; Pauktuutit Inuit Women's Association, 1989).

### ***Flexible child care services***

There are no definitive figures for the number of families who need child care during unusual or irregular hours, that is, outside approximately 8 a.m. to 6 p.m. on weekdays. However, data from the National Child Care Study reveal that as many as 44% of interviewed parents did not work what has long been considered a standard work week (weekdays only, with fixed hours of approximately 9:00 a.m. to 5:00 p.m.) (Lero, Goelman, Pence, Brockman & Nuttall, in preparation).

At the same time, there are a very limited number of child care programs in Canada which accommodate parents who need child care while they work shifts, extended hours or weekends (Friendly, et al., 1989). There are few regulated child care programs other than nursery schools (whose hours usually do not accommodate working parents' needs) which permit use for short hours.

There are almost no child care programs and very few family responsibility leave arrangements (usually through collective agreements) to assist working parents whose children are mildly ill or whose regular child care arrangement has broken down (Friendly, Cleveland & Willis, 1989; Townson, 1986).

### ***Other child care needs***

Child care needs studies carried out in a number of provinces in the past few years support the statement of a British Columbia child care Task Force that:

...all parents require some form of supplementary care for their children and all children benefit from contact with other children and families in the community (British Columbia Task Force on Child Care, 1991:1).

However, statistics on children and families who need or want child care for reasons other than the parent's absence due to work or study (that is, part-day early childhood education, parent-child resource centres, parenting education) are not ordinarily collected on a Canada-wide or even a province-wide basis. Needs assessments carried out in the last few years in various regions of Canada and data from the Canadian National Child Care Study support the assertion that there is a demand for these programs (Draper & Rose, 1990; Osborne & Associates, 1990).

## **THE HIGH COST OF CHILD CARE FOR PARENTS: AFFORDABILITY**

### ***Who pays for child care in Canada?***

Currently in Canada, most of the costs of child care are paid by parents. For many families, the high cost of regulated child care is a major barrier to its use (Cooke, Edwards, Rose-Lizée, & London, 1986). Unlike most other human services, Canadian child care programs rely primarily on user fees for revenue to meet operating expenses. In practice, this means that a child care centre must be able to depend on a steady clientele of parents who pay the fees regularly in order to pay its staff, purchase food and supplies and pay the rent.

Although today almost all provinces provide some form of operating, maintenance or salary grants, these are generally too small to reduce parent fees more than marginally. (For detailed information about provincial funding for child care, see British Columbia Task Force on Child Care, 1991).

Fee subsidies funded through the Canada Assistance Plan assist some low and modest income families in paying fees. The income levels at which these fee subsidies are available vary across Canada so that in some regions of the country, the cut-off for eligibility is as low as \$13,000 a year for a two-parent family with two children while in other provinces a family earning \$35,000 can be partially subsidized. Often two-parent middle income families are not eligible under provincial guidelines for a subsidy nor are they able to pay for regulated child care.

In some parts of Canada, even families who are fully eligible for a subsidy must pay a hefty surcharge while in other provinces there are many more eligible families than available subsidies. In 1988-89, while average provincial fees for group child care for infants ranged from \$300 to \$600 per month; for preschoolers, provincial fees averages ranged from about \$210 to \$450 per month (Childcare Resource and Research Unit, 1991).

### ***Why is child care so expensive?***

The bulk of the cost of regulated child care is related to staff salaries and benefits. Ordinarily, at least 85% of the budget of a non-profit child care program is spent in salaries and benefits for staff (Beach, 1987).

At the same time, ample evidence exists to show that child care staff are underpaid - in many parts of Canada they are vastly underpaid (Pay Equity Commission, 1989; Manitoba Child Care Association, 1987). As one federal government report pointed out, some child care staff are paid less than workers who care for animals ("paid less than zookeepers") (Schom-Moffatt, 1984). As high quality child care requires a sufficient number of well-trained, adequately paid staff, the wages of child care staff and the cost of child care for parents are inextricably connected unless substantial public funds enter into the equation to reduce fees and improve wages.

### **CHILD DEVELOPMENT: THE IMPACT OF THE QUALITY OF CHILD CARE**

Today, a substantial body of well-conducted research supports the assertion that while high quality child care can be an asset to children's development, poor quality care can be detrimental. Further, it appears that the effects of child care, high quality or poor, can have a long-term impact on children's development (for recent reviews of this literature, see Doherty, 1991b; Hayes et al., 1990; Howes, 1990; Phillips & Howes, 1987).

Family characteristics interact with child care characteristics in several ways. Although the quality of child care has an important impact on child development for children from all social classes, it also has demonstrated importance as a preventative program for poor children. Research suggests that poor, "high risk" children can benefit developmentally from high quality child care (Ontario Ministry of Community and Social Services, 1989). Most of the research on this subject is American and therefore, as the American social context is different from Canada's, it should

be treated with caution. However, there are some lessons which Canada can learn from this American experience. The Ontario Child Health Study recognized the importance of expanding:

...quality child care programs as a preventative measure against poor school performance and emotional and behavioural problems, particularly for poor children, regardless of whether their parents are working (Ontario Ministry of Community and Social Services, 1990:20).

Unfortunately, American and Canadian research also indicates that families who are more disadvantaged, (more poorly educated, lower-income, or more stressed) or more likely to choose poorer quality child care (Goelman & Pence, 1987; Clarke-Stewart, 1987).

Child development experts generally agree that the quality of child care is a more important factor than whether the care takes place in a child care centre or a home. The American National Center for Clinical Infant Programs concluded that "the quality of infant/toddler care matters enormously whether it takes place in the home or in a child care setting and whether the caregivers are a child's parents or another trusted adult" (National Center for Clinical Infant Programs, 1987).

### ***The components of high quality child care***

There is also agreement, supported by substantial research evidence, about the components of high quality child care (Hayes et al., 1990; Phillips & Howes, 1987; Lero & Kyle, 1986). These components include<sup>2</sup>:

- **staff-child ratios** which are adequate so that interactions between each child and the caregiver can be frequent;
- **group sizes** which allow children's interactions with other children and caregivers to be personal and individual;
- **caregivers who have formal schooling and specific training in early childhood education** so that the program is developmentally appropriate, not custodial, controlling or inappropriately "schooly";
- **staffing which is stable** so that children have a chance to develop consistent relationships with caregivers;
- **health and safety provisions** which ensure children's well-being;
- **a physical and administrative environment** which is adequate to enhance the program for everyone, including the caregivers.

### ***How do Canada's standards for the provision of child care measure up?***

Generally, Canada's provincial and territorial systems of regulation are not adequate. None of the provincial or territorial standards, even Canada's "best" provincial standards, fully meet established



criteria for high quality child care programs (United States Federal Register, 1980; National Association for the Education of Young Children, 1984).

Some provinces fall seriously short in several important areas. For example, several provinces have no requirements for group sizes. Of those which do regulate this important indicator of quality, all set maximum group sizes larger than recommended (National Association for the Education of Young Children, 1984). Although staff/child ratios established by some provinces reflect child development research, in a few provinces legislation allows as many as six or eight eighteen-month-olds or five infants for one staff-person (British Columbia Task Force on Child Care, 1991).

In the critical area of staff training, a number of Canadian jurisdictions have no or minimal requirements for training in early childhood education for child care staff. In comparison with European countries like France, Sweden, Denmark or Italy which have well-developed child care systems, Canadian child care standards are seriously deficient in staff training requirements (Moss, 1990; Richardson & Marx, 1990).

Health and safety requirements are usually not specifically prescribed in child care legislation. In some provinces, it is primarily the responsibility of local public health units to establish and monitor many aspects of basic health and safety in regulated child care. This is of concern because the involvement of local health authorities is often variable, even within the same province (Friendly, 1990).

Even provinces which have relatively good minimum requirements for the provision of care may unevenly enforce them. A Globe and Mail investigation of compliance with the Ontario *Day Nurseries Act* found that almost 40% of licensed child care centres operating in Ontario were not in compliance with the legislation (McIntosh & Rauhala, 1989). Later that year, the Provincial Auditor's report criticized the government for failing to enforce the legislated standards (Kyle, in press). Since that time, the provincial government has reviewed the enforcement of its child care standards. (See Kyle, In press for further discussion). Little detailed information about the monitoring of regulated child care programs and enforcement of minimum standards is available in most provinces.

From this perspective, Canada does not meet the terms set out in the United Nations Convention on the Rights of the Child. Article 3 of the Convention states that

States Parties shall ensure that the institutions, services and facilities responsible for the care or protection of children shall conform with the standards established by competent authorities, particularly in the areas of safety, health, in the number and suitability of their staff as well as competent supervision (United Nations, 1989:5).



### **PART III. WHAT IS THE SOLUTION?**

Canada's current child care policies do not provide solutions to the child care difficulties of contemporary families. Neither current national arrangements nor federal policy initiatives in the 1980s have adequately addressed the dilemmas of availability, affordability and quality.

As it has become obvious that current policy can not solve Canada's child care problems, non-governmental groups have proposed policy options which identify key policy questions and put forward a set of principles for national policy.

#### **CURRENT NATIONAL CHILD CARE POLICY**

At present, Canada has no national child care legislation or policy. The role of the federal government is limited to helping pay the child care costs of selected families through several kinds of funding schemes, the most obvious of which are subsidies for low income families and tax breaks for more affluent families.

Child care, like other Canadian health, education and social programs, is under the jurisdiction of the provinces and territories. Each province and territory has legislation which includes child care regulation and funding arrangements.

It should be noted that traditionally, other Canadian health, post-secondary education and social programs which are under provincial jurisdiction have been funded by the federal government through national legislation. The health care system is perhaps the best example of how federal spending powers have ensured national criteria so that Canadians in all regions of the country have had reasonable access to health care while provincial jurisdiction is maintained (Rachlis, 1991).

#### ***The Canada Assistance Plan***

The Canada Assistance Plan (CAP), Canada's major piece of welfare legislation, provides federal funds in an area of provincial jurisdiction within a national policy framework. This legislation, introduced in 1966, has historically been the main source of federal funds which are used for regulated child care.

The Canada Assistance Plan was not designed to fund child care programs *per se*. Instead, its purpose has been the alleviation or prevention of poverty by providing social assistance and a range of welfare services to a selected segment of Canadians. Child care, from the point of view of CAP, is a service which can be used to assist in the alleviation or prevention of poverty. CAP funds can be used to help to pay for child care services on behalf of families who are needy or likely to become needy without child care.

Until 1990, the Canada Assistance Plan provided federal reimbursement to the provinces of 50% of the cost of child care for eligible families, providing what are usually called child care subsidies. The spending arrangements have had several important features:

1. Cost-sharing is conditional upon provincial conformity to federal eligibility criteria both for families and for programs; families must be low or moderate income and child care programs (generally) must be regulated and government-operated or non-profit<sup>3</sup>;
2. Participation in the CAP subsidy program does not prevent a province from spending additional dollars on child care. In fact, most provinces spend non-cost-shared money for child care, such as direct or maintenance grants, subsidies in for-profit programs, capital expenditures or research and development.
3. Spending for child care through CAP is initiated by provincial governments. Compared to the possibilities under relatively generous federal guidelines, provincial governments severely limit cost-shared spending for child care. A 1987 study revealed that 72% of Canadian children aged six or younger whose parents were in the labour force would have been eligible for a full or partial subsidy if the provinces had used CAP fully. In practice, only 7% of these children actually received subsidized child care (Cleveland, 1987).
4. Until the federal budget of 1990, there was no federal maximum spending limit for eligible provincial expenditures. That is, for every dollar a province spent for eligible expenditures, the federal government reimbursed 50%. Thus, until 1990, it was the provinces which limited spending for child care subsidies, not the federal government. However, in the 1990 federal budget, the federal government limited CAP transfer payments to Ontario, Alberta and British Columbia to a maximum of 5% increase per year for two years; the time period was extended to five years in 1991.

These limitations to the federal-provincial agreements were challenged in court by Ontario, Alberta, British Columbia, Manitoba and the Native Council of Canada. The provinces won at the provincial court but the federal government appealed the decision to the Supreme Court of Canada. The Supreme Court ruled in August, 1991 that based on the principle of supremacy of Parliament, the federal government could limit its contributions if it so chose, regardless of federal/provincial agreements.

The implication of this limit is that child care subsidies, like other welfare spending, will no longer be fully cost-shared by the federal government and that provincial government initiatives in Ontario, Alberta and British Columbia will be constrained by the federal government for the first time since the Canada Assistance Plan was introduced in 1966.

Budget estimates for 1990-1991 indicate that the federal government expects to spend \$265 million through the child care provisions of the Canada Assistance Plan. Estimates for CAP child care expenditures were \$240 million in 1989-1990 and \$200 million in 1988-89 (Department of Finance, 1988; 1991).

### *The Child Care Expense Deduction*

Another way the federal government helps pay some of the child care expenses of selected families is through the Child Care Expense Deduction. The lower-income earner in a family (usually the mother) is allowed to deduct child care expenditures of \$4,000 per child up to age

seven from earned income. There are no stipulations about the nature of the child care arrangement utilized; it may be regulated or unregulated, profit or non-profit, high quality or poor quality. The caregiver's Social Insurance Number and a receipt are required.

Families using unregulated care are often unable to obtain a receipt from a caregiver who does not declare her earnings as income for tax purposes. It was estimated in 1986 that no more than 40% of families who were eligible claimed the deduction (Cooke et al., 1986).

The value of the child care tax deduction rises with income and is of no monetary value to low income families who pay no taxes. As one critic of the Child Care Expense Deduction as a child care measure summarised: "the more you have, the more you get" (Fraser, 1978).

The annual value of the deduction to a single parent earning \$35,000 a year with one child was \$861 in 1986, although the cost of regulated care would have been between \$2800 and \$5600, depending on the age of the child and the region of the country; unregulated care would have cost between \$2800 and \$4100 in the same year (Special Committee on Child Care, 1987; E.E. Hobbs & Associates Ltd., 1986). Lower and middle income families are reimbursed for a smaller portion of their child care expenses through the Child Care Expense Deduction so their out-of-pocket child care costs are higher than those of higher income families, making it likely that they will have to use cheaper, poorer quality care.

Estimates indicate that the federal government expenditure on the Child Care Expense Deduction was expected to be \$260 million in tax year 1990 (Department of Finance, 1991).

### ***Parental leave benefits***

Maternity and parental leave is an adjunct of a comprehensive child care system. Currently, the federal government includes maternity and parental leave benefit provisions under the Unemployment Insurance Act. In 1991 an eligible new mother may receive 60% of wages up to a maximum of \$408, for a period of 15 weeks. Following this period, either parent is entitled to receive parental leave benefits at the same rate for an additional 10 weeks. Adoptive parents are entitled only to parental leave benefits for 10 weeks.

Policy related to leave provisions is under provincial jurisdiction. Currently, all of the provinces and the territories have statutory maternity leave provisions and some have parental, adoption and paternity leaves. However, only Ontario and Quebec have modified provincial leave periods to allow parents to take advantage of the federal benefits.

## **POLICY ISSUES**

### ***The debate about child care policy in the 1980s***

During the past decade, there has been considerable substantive public debate about child care in Canada. During this debate, two things about child care policy have become apparent. First, a national child care policy is a necessary foundation for a child care delivery system to meet the variety of child care needs of children and families across Canada. Second, there is a recognition

that the specific details of a national policy will have a significant impact upon how child care will be delivered in the future.

In the mid 1980s, several key policy questions which were associated with child care issues emerged to structure the debate:

1. **Who is child care for?** Is child care for parents or for children or does it have several target groups? How can society and parents ensure that children receive high quality child care? Should child care be only for certain segments of society or should it be for all children and families?
2. **Who should run child care?** Under which jurisdiction and auspices should child care fall? Should child care be publicly-operated? If it is publicly-operated, should it be under the jurisdiction of social services, education or some other jurisdiction? If it is in the private sector, should it be operated for profit?
3. **Who should pay for child care?** What portion of the cost of child care should be supported by government? Should parents pay fees, and, if so, how much? How should government child care funds be distributed, to parents through a tax deduction or to a child care system?

### *Principles for child care policy*

An important feature of the debate about child care which took place during the 1980s was the consensus about fundamental principles for a child care system that developed among child care advocates and a broad range of other groups (including women's, labour, religious and professional organizations). (Minutes of Proceedings and Evidence of the Special Committee on Child Care, 1986; Friendly, Mathien & Willis, 1987). These principles recognized the need for:

- **universal and equitable access.** That is, all children and families regardless of family income, region of the country or work status should be entitled to good child care;
- **comprehensive service provision.** That is, different families, children and communities have varying child care needs. In order to meet these needs, a range of options, planned at the local community level, should be made available;
- **high quality.** That is, child care policy should begin with a basic assumption that child care programs will integrate the best available knowledge about child development into practice.

### *False solutions*

During the debate about child care in the 1980s, a number of policy options such as continued reliance on unregulated care and on user fees, tax measures, for-profit child care and work-related child care were debated. Available evidence suggests that these options would not lead towards

an equitable, comprehensive, high quality child care system for all families. Indeed, research indicates that some of these "false solutions" would encourage inequitable access, entrench poor quality care and limit real choices for families.

### **1. Reliance on user fees**

Research indicates that funding is a key factor in the achievement of high quality child care (Doherty, 1991). A major American study found poor wages to be a significant predictor of poor quality programs (Whitebook, Howes & Phillips, 1989). Child care programs need, as well, the support of reasonable physical environments and adequate equipment and supplies, all of which require funds.

As we pointed out earlier, high quality child care is labour intensive. If child care programs are adequately staffed and staff are adequately paid, most families will not be able to pay the full cost of child care. Like other Canadian health, educational and social services provided on a universal, equitable basis, high quality child care must receive substantial public funding to make it accessible to a broad range of families.

### **2. Reliance on unregulated child care**

A good system of regulation includes high minimum standards, appropriate infrastructure and program support, adequate monitoring of programs and enforcement of established standards. Research supports the contention that both group care and family day care are more likely to be high quality within a good system of regulation (Lero & Kyle, 1986; Doherty, 1991; Phillips & Howes, 1987).

A major American study found that child care programs in states with higher standards were generally better quality than those in jurisdictions with poorer standards (Whitebook et al., 1989). A British Columbia study found that regulated family day care was better quality than unregulated family day care, as did an Ontario study; American research had earlier produced the same findings in a national study (Goelman & Pence, 1987; Pepper & Stuart, 1989; Fosburg, 1981).

### **3. For-profit child care**

In Canada, the issue of auspice - in particular, the operation and public funding of for-profit child care - has received considerable attention. Generally, most Canadian groups with an interest in child care express a strong objection to encouraging for-profit child care with public funding (Friendly, Mathien & Willis, 1987; Phillips, 1989). The National Council of Welfare, reflecting on the relationship between auspice and quality noted that:

...profits are made by keeping costs down--paying low salaries to caregivers, raising child/staff ratios or compromising health, safety or nutritional standards--all of which hurt children (National Council of Welfare, 1988:27).

Research indicates that commercial child care rates more poorly on key predictors of quality including wages, staff-child ratios, staff training in early childhood education and staff turnover and is likely to pay lower wages and provide poorer benefits (West, 1988; Schom-Moffatt, 1985; Whitebook et al., 1989; DeGagne & Gagne, 1988; Doherty, 1991). An Ontario government report on the factors related to the quality of child care concluded that profit-making is incompatible with high quality child care:

...all of the findings taken together strongly support the conclusion that quality is more likely to be found in non-profit than for-profit centres (Doherty, 1991:63).

American research found that this difference in quality cannot be attributed to government funding; in Whitebook et al.'s study, for-profit centres scored more poorly on measures of high quality caregiving whether or not they received government funding (Whitebook et al., 1989). Although research on the quality of child care in Alberta (which has provided substantial public funds to both for-profit and non-profit child care) has not been carried out, observers note that the publicly-funded Alberta for-profit sector offers extremely poor quality child care (Bagley, 1986).

#### **4. Tax measures or vouchers**

Comparison of experiences in Canada, Europe and the United States suggests that it is inefficient and inequitable to distribute funds to individual families through the tax system or vouchers for the purpose of purchasing child care. A market approach to child care services, like other human services, does not appear to be effective in moving towards a fair system of high quality child care. A European committee studying child care funding structures concluded that:

...the free market model is a crude and dogmatic model for achieving quality. It does not address present problems of fragmentation of standards or distribution of resources. It assumes that more choice is necessarily better choice...if it is a fundamental principle of preschool services that all children should have access to good quality childcare, then the role of local and national government is crucial and the free market cannot deliver (European Commission Childcare Network, 1990:10).

#### **5. Work-related child care**

Although care provided in work-related child care programs has been a welcome addition to the supply, work-related child care does not offer a solution to Canada's child care problems. This approach proposes an individual rather than a societal responsibility for child care and promotes inequitable access to services.

Pragmatically, most employers who support work-related child care centres provide no more than occupancy costs (a relatively small portion of a centre budget) so that fees in these programs are similar to fees in other child care programs (Beach & Rothman, 1985). Although the supply of employer-supported child care increased from about 79 centres to about 200 centres in 1991 it still provides only a small proportion of regulated care (Beach & Rothman, 1985; Beach, Friendly &



Schmidt, in preparation). Work-related child care can be viewed as one aspect of a comprehensive child care system, not as a legitimate policy solution.

#### **6. Targeting child care to needy families**

...To begin to ask questions now about should we care about poor children more than all children is no way to build a vision (Lero, 1991:10).

Traditionally, much of the funding available to pay for child care in Canada has been targeted to needy or modest-income families. This approach has not made child care accessible to families with somewhat higher incomes. Observation of the child care situation and the social climate in the United States (where most social programs, including child care, are targeted to the needy), in contrast to European countries (where child care, like many other social programs, has been offered on a universal rather than a targeted basis), suggests that Canada should pursue a child care program for all families, not just selected sectors (Moss, 1990; Hayes et al., 1990)

#### **CHILD CARE AND THE FEDERAL GOVERNMENT IN THE 1980s**

During the 1980s, there was a considerable amount of political activity focused on child care. Most of the activity focused around two federal committees, one established by the Liberals in 1984 and one established by the Conservatives in 1986. This activity did not make any improvement in the child care situation but it set the stage for future debate in the 1990s.

##### ***The Report of the Task Force on Child Care***

In 1984, the Liberal government appointed a task force to study child care and to make recommendations to "consider...the role of the federal government in the development of a system of quality child care in Canada" (Cooke et al., 1986). The 1986 Report of the Task Force on Child Care recommended federal leadership to develop a comprehensive system of publicly-funded, high quality, universally-accessible, non-profit child care and to expand paid parental leave. The Task Force rejected reliance on tax breaks for parents, for-profit child care and reliance on user fees.

##### ***The Special Committee on Child Care***

The 1984 federal election brought the Conservatives to power and the recommendations of the Cooke Task Force (which were not released until 1986) were not implemented. Instead, the Conservatives established a Special Parliamentary Committee to report on child care.

In 1987, the Special Committee on Child Care made very different recommendations from those the Cooke Task Force had made. The recommendations included enhanced child care tax breaks for parents as well as capital and operating grants to both non-profit and commercial child care programs. Like the Task Force, the Special Committee proposed improvements in parental leave benefits. Although the Special Committee's report was widely criticized by child care advocates

and others, the federal government used it as the basis for developing a National Strategy on Child Care (Phillips, 1989; Gray, 1990).

### *The National Strategy on Child Care*

In 1987, a National Strategy on Child Care was proposed by the federal government. It included substantially enhanced child care tax measures (which were implemented in 1989), a research and development fund and a commitment to Canada's first national child care act. The Canada Child Care Act, (Bill C-144) proposed replacing the child care provisions of the (then) open-ended Canada Assistance Plan with a new funding scheme which would be used by the provinces to spend \$3 billion over 7 years (House of Commons Canada, 1988).

The response to the federal proposals by child care advocates, the women's movement and others with an interest in child care was overwhelmingly negative (Phillips, 1989). In addition to criticisms of the tax measures and new funding opportunities to commercial child care operators, there were objections that Bill C-144 lacked a framework of national objectives for federal spending. Critics were concerned as well that it proposed to replace CAP's open-ended funding arrangement with a new one which was so limited that it would inhibit, not encourage development of a system of high quality child care.

Following legislative committee hearings at which all the submissions opposed the legislation, Bill C-144 died in the Senate on the eve of the federal election of 1988.

### **CHILD CARE IN 1991: WHERE ARE WE NOW? WHERE DO WE GO FROM HERE?**

#### *The capping of CAP*

Although the late 1980s were a period of active debate about child care, there were no substantive improvements to federal child care policy. Indeed, until the federal budget of 1990, Canadian federal child care policy had not changed since the introduction of the Canada Assistance Plan in 1966<sup>4</sup>. However, in that budget, the federal government limited federal transfer payments for child care subsidies for the first time. This represented a fundamental shift in historic federal responsibility for low income Canadians which had been well established over the past twenty-five years (National Council of Welfare, 1991).

Ironically, the capping of CAP put child care advocates in the position of defending a status quo they had never supported. The child care provisions of the Canada Assistance Plan conceived of child care as a "welfare service, not a basic public service" and had generally been regarded as an inappropriate way of financing a child care system since the Royal Commission on the Status of Women raised this point in 1970 (Royal Commission on the Status of Women, 1970).

However, abolishing open-ended federal funding without replacing it with an improved funding arrangement not only penalizes low and moderate income working parents and their children, but weakens Canada's already fragile system of child care services, perhaps beyond repair. Together with the improved tax measures which had been implemented in 1989,



...the net effect of the federal government's child care policies [has been] enhancement of spending for higher income families [the tax measures] and restraints on spending for low and modest income families (Friendly, 1990).

### ***Federal spending power and decentralization***

Since the failure of the Meech Lake Accord, Canadians have engaged in considerable discussion about decentralization of federal responsibilities and devolving spending power for health and social programs to the provinces. This has occurred within the context of debate about constitutional change, national unity and self determination for Quebec.

During the 1980s, child care advocates looked toward other Canadian national programs, especially the health care system, for clues to guide the potential development of a Canadian child care system. The concept of national criteria together with federal spending powers which form the basis of the Canada Health Act was proposed by the Canadian Day Care Advocacy Association as a framework for a national child care policy (Canadian Day Care Advocacy Association, 1988).

However, the future of current federal-provincial funding arrangements is now in doubt. As one critic of decentralization points out, the federal government's only authority over the provinces in the area of health care is its ability to withhold transfer payments in order to maintain national criteria; this concept is applicable to social programs as well. As federal transfer payments to the provinces continue to diminish, so does the possibility of maintaining national programs through the federal government's spending powers. Furthermore, he points out,

...the issue of the federal/provincial arrangements for health policy is intimately linked with the larger issues of fiscal federalism and the constitution (Rachlis, 1991:14).

This complex constitutional discussion raises an important question for those with an interest in child care: Is child care the social program which Canadians will never have?

### ***1991: Still struggling for better child care***

After several decades of discussion about child care, we are back where many of us began. In 1991, a majority of young Canadian children spend a large portion of their preschool years in child care arrangements outside the family. The number of children who need alternative care while their parents are at work or studying, or whose parents want or need child care opportunities for other reasons, continues to increase annually.

The child care situation in much of Canada is more critical than it ever has been before. Canada has no child care system and seems likely to remain without one unless federal leadership begins to reflect upon the best available knowledge about child care and children's development. According to the United Nations Convention on the Rights of the Child, signatory countries:

... shall render appropriate assistance to parents and legal guardians in the performance of their child-rearing responsibilities and shall ensure the development of institutions, facilities and services for the care of children;

... shall take all appropriate measures to ensure that children of working parents have the right to benefit from child care services and facilities for which they are eligible and;

... shall ensure that the institutions, services and facilities responsible for the care or protection of children shall conform with the standards established by competent authorities, particularly in the areas of safety, health, in the number and suitability of their staff as well as competent supervision (United Nations, 1989:10,10,5).

Canada will need to make substantial improvements in child care if it intends to meet its international commitments.

### ***Child care and political will***

In 1991, Canada still lacks the political will to design and implement a national system of child care which truly meets the needs of children and families. Our governments have not risen to the challenge posed by the Task Force on Child Care in 1986:

We are convinced that the government that initiates and perfects these (child care) systems will be rewarded, in the short run by the accolades of the people and, in the long run, by the favourable judgement of history. These systems will be remembered beside such significant social reforms as child employment laws, social allowance legislation, universal public education, health care, and public pensions as the measures of civilization of our era (Cooke, et al., 1986:342).

What kind of child care policy do Canadian children and families need in 1991? A look at the research and practical evidence suggests that it is legitimate to apply the criteria developed in the 1980s to child care policy in the 1990s. Based on the growing body of research and practical evidence, it is apparent that the principles which were developed during that period are still valid even in the new social policy climate of the 1990s.

### ***Proposals for the 1990s***

To meet its international commitments as well as its obligations to families, and to support and develop a productive workforce, Canada must build a high quality system of child care accessible to families in all regions of the country. In order for this system to develop, the federal government must be responsible for establishing funding policy which shapes a child care system while recognizing provincial/territorial jurisdiction.

A Canadian federal government must lead in establishing federal-provincial/territorial agreements to create a Canadian child care system which is consistent with constitutional arrangements. These agreements must include broad objectives to ensure that provincial programs meet the principles of:

- universality and equitability
- high quality
- comprehensiveness.

A commitment to establishing a system of child care which meets the needs of Canadian children and families must be part of constitutional discussions. New federal-provincial/territorial funding arrangements for this child care system must be included in future financial and social programs and agreements. Canada's social and economic agenda must include provisions for child care as a key component.

In 1984, the Royal Commission on Equality spoke about child care in words which are as eloquent in 1991 as they were then:

Child care is a social investment in the future. It is not, therefore, the exclusive financial responsibility of an employer, or a union, or a worker, or a parent. It is a public expense that should ultimately be borne by all taxpayers, much as education is. Child care should be seen as a public service to which every child has a right (Abella, 1984:92).

## ENDNOTES

1. The definition of the primary care arrangement used in the Canadian National Child Care Study is the arrangement used for work-related purposes other than school for the greatest number of hours in the reference week; the number of hours provided in this arrangement vary greatly. Care arrangements in addition to the primary arrangement may also have been used.
2. For a comprehensive review of this research literature see Doherty, 1991b.)
3. Provinces access CAP child care funds in two ways, the social assistance route and welfare services route. The welfare services route, used by all of the provinces except Ontario, allows income testing for family eligibility and may be used to provide subsidies only in regulated, non-profit programs. The social assistance route, used by Ontario, requires needs testing and allows subsidies to be used in unregulated and for-profit care.
4. It should be noted that the Child Care Initiatives Fund (CCIF), a seven-year program budgeted at \$100M, which provides funding to a wide range of research and developmental projects in the child care field, was implemented as part of the 1988 National Child Care Strategy. The Child Care Initiatives Fund is a funding program rather than a policy. This resource has enabled various communities across Canada to identify child care needs and initiate demonstration projects.

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**The  
Childcare  
Resource and  
Research  
Unit**

Centre for Urban & Community Studies • University of Toronto  
455 Spadina Avenue • Room 406  
Toronto, Ontario • M5S 2G8  
(416) 978-6895 • FAX (416) 971-2139  
CRRU@epas.utoronto.ca

